## PART B - FEE(S) TRANSMITTAL

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new York, N	Y 10110			Lourdes A	lala	(Depositor's name)	
			6	Jourden A	Yala	(Signature)	
			يــا	January 21	2008		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	LATTO	ORNEY DOCKET NO.	CONFIRMATION NO.	
	10/540,091 06/20/2005  ITT E OF INVENTION: BOLVEFOTINES HAVING CELL OBJOURNES		Wenping Wu OI ASE II ACTIVITY AN	10377.204-US AND POLYNLICLEOTIDES ENCODING SAME		7525	
TITLE OF INVENTION: POLYPEPTIDES HAVING CELLOBIOHYDROLASE II ACTIVITY AND POLYNUCLEOTIDES ENCODING SAME .							
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АРРЫМ. ТҮРБ	SMALL ENTITY	issue fee due	PUBLICATION FEE DUE	PREV. PAID ISSUB FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	01/22/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
CHOWDHURY, I	QBAL HOSSAIN	1652	435-200000		<u>.</u>		
Address form PTO/SI  "Fee Address" ind	ondence address (or Cha 3/122) attached, ication (or "Fee Address 12 or more recent) attach	inge of Correspondence	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE    Novel mes  (B) RESIDENCE: (CITY and STATE OR COUNTRY)    Description of the patent							
Please check the appropriate assignee category or categories (will not be printed on the patent): Undividual U Corporation or other private group entity U Government							
4a. The following fee(s):  Issue Fee  Publication Fee (N Advance Order - 1	o small entity discount p		b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-170 (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
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Authorized Signature	Elias	Lambrio		Date Jany	Ary 21, 200	<b>≈</b> 8	
Typed or printed name	Elias	Lambiris		Registration No	33,728		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USP1O to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							